



MASTER LICENSE SERVICE
DEPARTMENT OF LICENSING
PO BOX 9034
OLYMPIA, WA 98507-9034
Telephone: (360) 664-1400

UBI NUMBER

LICENSE NUMBER

FINANCIAL STATEMENT

Complete all spaces or print N/A in spaces that do not apply.

Note: This financial statement form must be completed for each organization and individual required to be backgrounded as part of this license application.

Type of licenses you are applying for: ☐ LIQUOR ☐ GAMBLING **INFORMATION AS OF (SPECIFY DATE):** _____

BUSINESS NAME (DBA or trade name)

THIS FINANCIAL STATEMENT IS FOR: (Choose either No. 1 or No. 2)

<input type="checkbox"/> 1. AN INDIVIDUAL (can be joint for husband and wife)				
I AM A: (Check appropriate boxes) <input type="checkbox"/> SOLE PROPRIETOR <input type="checkbox"/> SPOUSE <input type="checkbox"/> LIMITED PARTNER <input type="checkbox"/> FINANCIER <input type="checkbox"/> LLC MEMBER				
<input type="checkbox"/> CORP. OFFICER Title: _____ <input type="checkbox"/> STOCKHOLDER (10% or more) <input type="checkbox"/> OTHER: _____				
NAME: Last		First	Middle	
HOME MAILING ADDRESS: Street or Route		City	County	State or Country Zip Code
DAY/CELL PHONE ()	EVENING PHONE ()		FAX NUMBER ()	
<input type="checkbox"/> 2. A BUSINESS ENTITY				
BUSINESS ENTITY IS A: <input type="checkbox"/> CORPORATION <input type="checkbox"/> LIMITED PARTNERSHIP <input type="checkbox"/> LIMITED LIABILITY COMPANY <input type="checkbox"/> LIMITED LIABILITY PARTNERSHIP				
NAME OF BUSINESS ENTITY:				
BUSINESS ENTITY MAILING ADDRESS: Street or Route		City	County	State or Country Zip Code
DAY/CELL PHONE ()	EVENING PHONE ()		FAX NUMBER ()	

A ASSETS (at lower cost or market value)		B LIABILITIES (over \$500)	
	AMOUNT		AMOUNT
Bank Checking (list in E)		Notes Payable (list in N)	
Bank Savings (list in F)		Taxes Payable (list in N)	
Life Insurance		Accounts and Bills Payable (list in O)	
Cash on Hand		Credit Cards/Consumer Debts/Student Loans (auto, etc. (list in P)	
Stocks, Bonds and Mutual Funds (list in G)		Leases and Contracts (list in Q)	
Notes/Accts. Receivable (list in H)		Mortgages and Liens on Real Estate (list in Q)	
Business/Other Investments (list in I)		Court Ordered Payments (list in R)	
Real Estate Owned (list in J)			
Mortgages and Contracts Owned (list in K)			
Automobiles (list in L)		TOTAL LIABILITIES	
Boats/Other Vehicles (list in L)		NET WORTH = Total Assets minus Total Liabilities	
Miscellaneous Property (jewelry, collections, gae/kye) (list in M)			
TOTAL ASSETS		TOTAL LIABILITIES AND NET WORTH	
C ANNUAL INCOME (all household)		D PERSONAL INFORMATION	
	AMOUNT		
Salary (include spouse & other household salaries)		Other Business Interests (list all over 5% ownership):	
Bonus and commissions			
Dividends			
Other Income (rental, investment interest)			
TOTAL INCOME			

ASSETS							
E CHECKING ACCOUNTS							
BANK NAME		ACCOUNT TYPE		ACCOUNT NUMBER		BALANCE	
F SAVINGS ACCOUNTS							
BANK NAME		ACCOUNT TYPE		ACCOUNT NUMBER		BALANCE	
G STOCKS,BONDS, MUTUAL FUNDS, IRA'S, 401K'S							
COMPANY		INVESTMENT TYPE (mutual fund, stock, IRA, etc.) & ACCT #		DATE ACQUIRED		# OF SHARES/FACE VALUE	
H NOTES AND ACCOUNTS RECEIVABLE (monies owed to you or your business)							
FROM WHOM (full name, address and phone number)				CURRENT BALANCE		MONTHLY PAYMENT	
I BUSINESS AND OTHER INVESTMENTS							
BUSINESS INVESTMENT NAME				FAIR MARKET VALUE		ANNUAL REVENUES	
J REAL ESTATE OWNED							
ADDRESS OF PROPERTY		DATE ACQUIRED		PURCHASE PRICE		NAME ON TITLE	
K MORTGAGES, LEASES AND CONTRACTS OWNED (paid to you/receivable)							
DESCRIPTION OR ADDRESS		FULL NAME OF DEBTOR		PHONE		PAYMENT SCHEDULE	
L AUTOMOBILES, BOATS AND OTHER VEHICLES (industrial, recreational, farm)							
MAKE, MODEL, DESCRIPTION		YEAR		DATE ACQUIRED		NAME ON TITLE	

M MISCELLANEOUS PROPERTY (jewelry, collections, gae/kye)							
DESCRIPTION		DATE ACQUIRED	PURCHASE PRICE	CURRENT BALANCE	FAIR MARKET VALUE		
LIABILITIES							
N NOTES AND TAXES PAYABLE (owed by you)							
TO WHOM (Full name, address and phone number)		ORIGINAL DATE OBLIGATED	CURRENT BALANCE	MONTHLY PAYMENT	DUE DATE		
O ACCOUNTS AND BILLS PAYABLE (owed by you)							
TO WHOM (Full name, address and phone number)		ORIGINAL DATE OBLIGATED	CURRENT BALANCE	MONTHLY PAYMENT	DUE DATE		
P CONSUMER DEBTS/STUDENT LOANS (credit cards, auto, other)							
TYPE OF DEBT	NAME OF LENDER		ORIGINAL BALANCE	INTEREST RATE	MONTHLY PAYMENT	CURRENT BALANCE	
Q LEASES, MORTGAGES AND CONTRACTS OWING (paid by you/payable) Include Rent Payments							
PROPERTY ADDRESS	FULL NAME OF LENDER/LANDLORD	PHONE	CURRENT BALANCE	AMOUNT PAST DUE	MONTHLY PAYMENT	ORIGINAL BALANCE	INTEREST RATE
R COURT ORDERED PAYMENTS							
TO WHOM	ORIGINAL ORDERED AMOUNT	DATE OF ORDER	MONTHLY PAYMENT	CURRENT BALANCE			
GENERAL INFORMATION							
* Attach additional pages to fully explain any "YES" answers to the questions below. Attach copies of documents and court papers.							
1) Is anyone a guarantor, endorser or co-signer on any of your personal or business debts, contracts, leases or other liabilities?						<input type="checkbox"/> YES <input type="checkbox"/> NO	
2) Are there any outstanding judgments against you or any business in which you had 5% or more ownership or financial interest?						<input type="checkbox"/> YES <input type="checkbox"/> NO	
3) Have you or any business in which you had 5% or more ownership or financial interest been directly or indirectly obligated on any loan which resulted in foreclosure, transfer of title in lieu of foreclosure, or judgments?						<input type="checkbox"/> YES <input type="checkbox"/> NO	
4) Are you or any business in which you had 5% or more ownership or financial interest presently delinquent or past due on any federal debt or any other loans or financial obligations?						<input type="checkbox"/> YES <input type="checkbox"/> NO	
5) Have you or any business in which you had 5% or more ownership or financial interest ever been required to make court-ordered payments?						<input type="checkbox"/> YES <input type="checkbox"/> NO	
6) Have you or any business in which you had 5% or more ownership or financial interest been a defendant in any suits or legal actions regarding financial matters within the last five years?						<input type="checkbox"/> YES <input type="checkbox"/> NO	
7) Have you ever filed for personal bankruptcy, or been part of a business in which you had 5% ownership or financial interest that has filed for bankruptcy?						<input type="checkbox"/> YES <input type="checkbox"/> NO	

CERTIFICATION

I certify that this Financial Statement (pages 1,2 and 3) represents my true financial status as of this date. I hereby authorize investigation of my financial records and other sources as necessary for licensing.

SIGNATURE

TITLE

DATE

(if corporate officer)